

## Auction Company Application Instructions

**1. Complete in detail the Auction Company Registration Application.**

**2. Check your type of business:**

- Sole Proprietor
- Partnership
- Corporation

If you checked Partnership or Corporation, please provide a copy of the partnership agreement or the current corporation document.

**3. Complete the Financial Certification Affidavit attached and return it with your application.**

**4. Attach the appropriate fee, payable to the Washington State Treasurer.**

- Include the Auction Company Surety Bond (*attached*) or other security approved by the Director for an amount not less than five thousand dollars and not more than twenty-five thousand dollars.
- The amount of the bond or other security is based on the value of the gross sales sold at auctions conducted by the auction company during the previous calendar year.
- For a new auction company, the estimated value of the goods and real estate to be sold at auction during the current calendar year.

The value of gross sales and the corresponding bond or other security is based on the following scale:

Sales	Bond/Trust Amount
\$00.00 to \$24,999.99	\$ 5,000.00
\$25,000.00 to \$49,999.99	\$10,000.00
\$50,000.00 to \$99,999.99	\$15,000.00
\$100,000.00 to \$499,999.99	\$20,000.00
\$500,000.00 and above	\$25,000.00

**5. Check your application carefully for completeness.**

Notarize, sign the surety bond, and confirm that the surety bond seal is affixed before mailing it to us.

**6. Return your completed application and supporting documents to:**

Department of Licensing  
Auctioneer Section  
P.O. Box 9048  
Olympia, WA 98507-9048  
[dol.wa.gov](http://dol.wa.gov)

**If you do not have a Revenue Tax Number/Unified Business Identifier (UBI) number, please contact the Department of Revenue at 1-800-647-7706, or the Department of Licensing's Master License Service at (360) 664-1400.**

## Auction Company Registration Application



FOR VALIDATION ONLY

001-070-202-0002

### Fee: \$200.00

Make remittance payable to State Treasurer.  
Send this application with your remittance to:  
Department of Licensing  
PO Box 9048  
Olympia, WA 98507-9048

### Company Information

Please type or print clearly in dark ink

Business Name \_\_\_\_\_

Business Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Physical Address of Business \_\_\_\_\_

IF DIFFERENT FROM ABOVE

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Business Telephone No. (\_\_\_\_\_) \_\_\_\_\_  
AREA CODE

Washington Corporation No. \_\_\_\_\_ IF APPLICABLE WA Revenue Tax No. \_\_\_\_\_ UNIFIED BUSINESS IDENTIFIER (UBI)

Trust Account: \_\_\_\_\_ / (\_\_\_\_\_) / \_\_\_\_\_  
NAME OF BANK AREA CODE PHONE NO. TRUST ACCOUNT NO.

**Proceeds received and not paid to clients within 24 hours must be deposited no later than the next business day in a trust account located in this state (RCW 18.11.230).**

**Type of Business:** ☐ Sole Proprietor ☐ Partnership ☐ Corporation

If you checked Partnership or Corporation, attach one copy of the partnership agreement or the current corporation document. Each member **actively engaged** in the business of auctioneering is required to be licensed as an auctioneer and each must file an application for licensure, including surety bond or other security approved by the director.

Washington Auctioneer License No. \_\_\_\_\_

### Applicant Information

Applicant Name \_\_\_\_\_ Telephone No. (\_\_\_\_\_) \_\_\_\_\_  
OWNER OR RESPONSIBLE AUCTIONEER AREA CODE

Check one: ☐ Resident ☐ Non-resident from \_\_\_\_\_ STATE

Date of Birth \_\_\_\_\_

### For Office Use Only

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Applicant Personal Information



1. Have you been convicted of a crime, misdemeanor or felony in this state, any other state, by the federal government, or any other jurisdiction within the past ten years? ☐ Yes ☐ No
2. Is there a criminal complaint, accusation, or information presently pending against you or are you currently under indictment in this state, any other state, by the federal government, or any other jurisdiction? ☐ Yes ☐ No
3. Has any professional or occupational license, certification or permit held by you, been fined, suspended, revoked, refused or denied in this state, any other state, by the federal government or any other jurisdiction? ☐ Yes ☐ No
4. Have you ever had a civil court order, verdict, or judgement entered against you in any court of competent jurisdiction in this state, any other state, the federal government, or any other jurisdiction? ☐ Yes ☐ No

**Please attach a letter of explanation for any Yes answers to the questions above, including charge(s), date of conviction, civil judgment or order, county jurisdiction, state, and disposition of charges.**

## Affidavit

I, \_\_\_\_\_, being first duly sworn, depose and say that I am the responsible auctioneer and that I am authorized to sign for the partnership or corporation (*if applicable*), and that all auctioneers hired by me to do business in this state will be properly licensed.

I have carefully read the questions in this application and have answered them completely, and under RCW 9A.72.085, I declare under penalty of perjury under the law of the state of Washington that my answers and all statements made by me herein are true and correct. Should I furnish any false information in this application, I agree that it will constitute cause for the denial, suspension or revocation of a license to practice as an auction company in the state of Washington.

**X**

SIGNATURE OF RESPONSIBLE/AUTHORIZED AUCTIONEER

CITY

STATE

DATE

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

SEAL

NOTARY PUBLIC IN AND FOR THE STATE OF

**X**

SIGNATURE

PRINTED NAME OF NOTARY PUBLIC

RESIDING AT

APPOINTMENT EXPIRATION DATE

**Upon Filing, This Application Becomes a Public Record and is  
Subject to Public Disclosure Provisions Under RCW 42.56**

## Auction Company Financial Certification Affidavit

NAME <i>(Print)</i>	COMPANY NAME	AUCTIONEER/AUCTION CO. LICENSE NO.	
BUSINESS ADDRESS	CITY	STATE	ZIP CODE
HOME ADDRESS	CITY	STATE	ZIP CODE
BUSINESS TELEPHONE (     )	HOME TELEPHONE (     )		

### 1. ☐ New Applicant

I have not been licensed as an auctioneer/auction company in Washington State. During the next 12 month period, the total **Estimated Gross** value of goods and/or real estate to be sold will be \$\_\_\_\_\_.

**Please include the auctioneer/auction company surety bond.**

### 2. ☐ Corporation                      ☐ Partnership                      ☐ Sole Proprietorship

This is to certify that during the past calendar year (*January 1 through December 31*) the total gross value of all goods and/or real estate sold by me was \$\_\_\_\_\_.

### 3. ☐ Licensed Auctioneer

This certifies that I have been employed by the following auction company(ies) during the past calendar year, January 1 through December 31:

*Attach additional pages if necessary.*

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_ Co. Phone (     ) \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_ Co. Phone (     ) \_\_\_\_\_

According to WAC 308-11-050 and based upon the above declaration, my bond/trust account is in the amount of \$\_\_\_\_\_, and has been issued by \_\_\_\_\_,

INSURANCE COMPANY/PUBLIC DEPOSITORY

\_\_\_\_\_ whose agent is \_\_\_\_\_.

ADDRESS

NAME

Under RCW 9A.72.085, I declare under penalty of perjury under the law of the state of Washington that the foregoing is true and correct.

Applicant Signature **X** \_\_\_\_\_ Date \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Auction Company Surety Bond**  
**Required by (RCW 18.11)**

Effective Date of Bond: \_\_\_\_\_ Bond Number \_\_\_\_\_

KNOW ALL PERSONS BY THESE PRESENTS: That \_\_\_\_\_

Check one: ☐ Sole Proprietor ☐ Partnership ☐ Corporation

doing business as \_\_\_\_\_

as Principal, at the following address: \_\_\_\_\_

and \_\_\_\_\_

a corporation organized and existing under the laws of the state of \_\_\_\_\_  
and authorized to transact surety business in the state of Washington, as Surety, are held and firmly bound unto the

STATE OF WASHINGTON in the sum of \_\_\_\_\_ Dollars lawful money of the United States  
of America to be paid to the said state of Washington, for which payment well and truly to be made we bind ourselves, our  
heirs, executors, administrators, successors and assigns, jointly and severally firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT: Whereas, the said principal has made application for an  
Auction Company License by Business and Professions Division of the state of Washington for carrying on the business of  
an Auction Company within the state of Washington; and is required by Chapter 18.11 RCW, to furnish a bond in the penal  
sum of \_\_\_\_\_ Dollars with good and sufficient surety, conditioned as required by said law.

NOW, THEREFORE, If the said principal will comply with all the provisions of Chapter 18.11 RCW, of the state of Washington  
and with all rules and regulations adopted by the Director of the Department of Licensing, of said state pursuant to the  
provisions of Chapter 18.11 RCW, and will pay all amounts that may be adjudged against Principal by reason of violation  
of Chapter 18.11 RCW or any rules or regulations adopted pursuant thereto in the conduct of Principal's business as an  
Auctioneer, then the above obligation shall be null and void; otherwise to remain in full force and effect.

PROVIDED: That any person having a claim against Principal for damage as a result of any violation by Principal or its agent  
of Chapter 18.11 RCW, or any rules or regulations adopted pursuant thereto may bring a suit on this bond in the Superior Court  
of the County in which Principal's business is located, or of any county in which jurisdiction of the Principal may be had.

PROVIDED FURTHER: That the aggregate liability of the Surety hereunder for any and all claims presented shall not exceed  
the penal sum of this bond. PROVIDED FURTHER: That Business and Professions Division shall be notified thirty (30) days  
prior to the cancellation of this bond, along with the reason for cancellation or termination pursuant to provisions of WAC 308-  
11-060. No bond filed shall be approved unless it expressly provides that it will be effective for one year following the effective  
date of its cancellation or termination, whether because of expiration, suspension, or revocation of the license, or otherwise,  
as to any covered act or acts and omission or omissions of the licensee occurring on, or prior to, the effective date of  
cancellation or termination.

IN WITNESS WHEREOF, the Said Principal and the Said Surety have affixed their hands and seal this \_\_\_\_\_

day of \_\_\_\_\_, 20\_\_\_\_\_.

PRINCIPAL

SURETY  
Name \_\_\_\_\_

Business Name \_\_\_\_\_

Attorney-in-Fact \_\_\_\_\_

By \_\_\_\_\_  
SIGNATURE OF INDIVIDUAL AUTHORIZED TO SIGN FOR CORPORATION  
OR PARTNERSHIP IF DOING BUSINESS AS SUCH

Insurance Agency Name \_\_\_\_\_

Insurance Agent \_\_\_\_\_

(SURETY SEAL)

Agent's Address \_\_\_\_\_

Telephone No. \_\_\_\_\_